114.3 CMR DIVISION OF HEALTH CARE FINANCE AND POLICY

114.3 CMR 6.00: RATES OF PAYMENT FOR MENTAL HEALTH SERVICES

PROVIDED IN COMMUNITY HEALTH CENTERS AND

MENTAL HEALTH CENTERS

Section

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6.01: General Provisions

- (1) Scope, Purpose and Effective Date. 114.3 CMR 6.00 shall govern the rates of payment to be used by all governmental units and by purchasers under M.G.L. c. 152 in making payment to eligible mental health centers and community health centers which provide mental health services to publicly-aided individuals and industrial accident patients. 114.3 CMR 6.00 shall become effective on October 16, 2003. The rates set forth in 114.3 CMR 6.00 shall also apply to individuals covered by M.G.L. c. 152 (Worker's Compensation Act).
- (2) <u>Authority</u>. 114.3 CMR 6.00 is adopted pursuant to M.G.L. c. 118G and M.G.L. c.152 § 13

6.02: General Definitions

Meaning of Terms. In addition to the general definitions contained in 114.3 CMR 2.00, terms used in 114.3 CMR 6.00 shall have the meaning ascribed in 114.3 CMR 6.02.

<u>Case Consultation</u>. Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employees or institutions which may include the preparation of reports of the patient's psychiatric status, history, treatment or progress (other than for legal or consultative purposes) for other physicians, agencies or insurance carriers.

<u>Clinical Psychologist or Psychological Associate</u>. An individual who by training and experience meets the requirements for licensing by the Massachusetts Board of Registration of Psychologists and is duly licensed to practice psychology in the Commonwealth or who meets the requirements of education and experience in clinical psychology that have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c 152.

<u>Community Consultation and Education</u>. Services provided by professional personnel to representatives of schools, courts, police, organizations, or agencies with the aim of problem solving and imparting knowledge in areas such as prevention, availability of resources and clinical procedures. Such consultation is distinct from case consultation in that it does not address the problems of a particular patient but rather the community at large.

<u>Community Health Center</u>. A clinic which provides comprehensive ambulatory services and which is not financially or physically an integral part of a hospital.

<u>Community Mental Health Center.</u> A clinic which provides comprehensive ambulatory mental health services and which is not financially or physically an integral part of a hospital.

<u>Counselor</u>. An individual who has earned a master's degree in Counseling from a recognized educational program and who also meets conditions of participation which have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c. 152.

<u>Couple Therapy</u>. Therapeutic services provided by an authorized staff member to a couple whose primary complaint and concern is disruption of their relationship and/or family.

<u>Diagnostic Services</u>. A session between a client and one or more staff members who are authorized to render mental health services for the determination and examination by interview techniques of a patient's physical, psychological, social, economic, educational and vocational assets and disabilities for the purpose of developing a diagnostic formulation and designing a treatment plan and procedures by a qualified staff member in order to evaluate aspects of an individual's functioning, including aptitudes, educational achievements, cognitive processes, emotional conflicts, and type and degree of psychopathology. These tests must be published, valid, and in general use as defined by listing in the Mental Measurement Yearbook or by conformity to the Standards for Educational and Psychological tests of the American Psychological Association.

Division. The Division of Health Care Finance and Policy.

<u>Eligible Provider</u>. A mental health center or community health center which meets the conditions of participation that have been or may be adopted by a governmental unit purchasing mental health services or by purchasers under M.G.L. c. 152.

<u>Emergency Services</u>. Services providing *immediate* face-to-face mental health evaluation, diagnosis, hospital prescreening, treatment, and arrangements for further care and assistance as required, up to 24 hours a day, seven days a week, to individuals showing sudden, incapacitating emotional stress.

<u>Family Consultation</u>. A preplanned meeting of at least _ hour with the parent or parents of a child who is being treated at the center when the parent or parents are not clients of the center.

<u>Family Therapy</u>. The treatment of more than one member of a family unit at the same time in the same session by one or more authorized staff members. At least one of the family members must be an identified patient of the clinic program.

<u>Governmental Unit</u>. The Commonwealth of Massachusetts, or any of its departments, agencies, boards, commissions or political subdivisions.

<u>Group Therapy</u>. A treatment session conducted by one or more authorized staff members for the application of psychotherapeutic or counseling techniques to a group of people, most of whom are not related by blood, marriage, or legal guardianship. The group shall not include more than ten publicly-aided individuals.

<u>Individual Therapy</u>. A therapeutic meeting between a patient alone and one or more authorized staff members to help ameliorate emotional problems, conflicts, and disturbances.

<u>Medication Visit (Aftercare)</u>. A recipient visit to the center specifically for prescription, review, and monitoring of medication by a psychiatrist, or administration of prescribed intramuscular medication by qualified personnel.

<u>Multiple-Family Group Therapy</u>. The treatment of more than one family unit at the same time in the same session by one or more authorized staff members. There is more than one

family member present per family unit and at least one of the family members per family unit must be an identified patient of the clinic program.

Occupational Therapist. An individual who is registered with the American Occupational Therapy Association and who also meets the conditions of participation which have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c. 152.

<u>Psychiatric Nurse</u>. An individual who is currently registered by the Massachusetts Board of Registration in Nursing and who has earned a master's degree from an accredited graduate school of psychiatric nursing or who meets the conditions of participation which have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c. 152.

<u>Psychiatric Social Worker</u>. An individual who has earned a Master's degree from an accredited graduate school of social work or who meets the conditions of participation which have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c. 152.

<u>Psychiatrist</u>. An M.D. who is registered in Massachusetts and who is certified or eligible for certification by the American Board of Psychiatry and Neurology or who meets such conditions of participation as have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c. 152.

<u>Publicly-Aided Individual</u>. A person for whose medical and other services a governmental unit is in the whole or in part liable under a statutory program.

<u>Reevaluation</u>: A session between a client and one or more staff members who are authorized to render mental health services for the determination and examination by interview techniques of a patient's physical, psychological, social, economic, educational and vocational assets and disabilities for the purpose of reevaluating the diagnostic formulation, treatment plan and procedures in order to assess aspects of an individual's functioning.

Staff Member Authorized to Render Billable Mental Health Services. An individual who provides the services referred to in 114.3 CMR 6.00 under the auspices of an eligible provider and meets the qualifications of any of the following professions: Psychiatric Social Worker, Psychiatric Nurse, Counselor or Occupational Therapist. This also includes staff members meeting the qualifications which have been or may be adopted by a governmental unit purchasing mental health services from eligible providers or by purchasers of such services under M.G.L. c. 152.

6.03: Rate Provisions

- (1) <u>Effect of 114.3 CMR 6.00</u>. The rates of payment under 114.3 CMR 6.00 shall constitute full compensation for mental health services provided by community health centers and mental health centers to publicly-aided and industrial accident patients as well as full compensation for necessary administration and professional supervision associated with patient care.
- (2) <u>Rates of Payment</u>. Rates of payment for authorized mental health services to which 114.3 CMR 6.00 applies shall be the lower of:
 - (a) the eligible provider's usual charge to the general public; or
 - (b) the schedule of allowable rates set forth in 114.3 CMR 6.03(2)(b) below.

Service Code	Allowable Rates	Service Description
90801	\$85.61 per hour	<u>Diagnostic Services</u> Psychiatric diagnostic interview examination.
90862	\$ 32.09 per visit of	Medication Visit (After Care) Pharmacologic management, including prescription, use and review of medication with no more than minimal medical psychotherapy
90804	approximately 15 minutes \$34.56 per one-half hour	Individual Therapy Individual psychotherapy, insight-oriented, behavior modifying and/or supportive, in an office or outpatient facility, approximately 20 to 30 minutes face-to-face with the patient.
90806	\$69.12 per hour	Individual psychotherapy, insight-oriented, behavior modifying and/or supportive, in an office or outpatient facility approximately 45 to 50 minutes face-to-face with the patient
90847	\$34.56 per one-half hour	Couple/Family Therapy Family psychotherapy (conjoint psychotherapy) (with patient present)

Group Therapy

90853 \$8.01 Group psychotherapy (other than multiple-family group)

per person per one-half hour
session not to exceed
10 publicly- aided clients

Multiple-Family Group Therapy
Multiple-family group psychotherapy

per person per one-half hour session not to exceed 10 publicly-aided clients

\$8.01

90849

90882	\$34.19 per one-half hour	Case Consultation Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers or institutions
90889	\$34.19 per one-half hour	Preparation of report of patient's psychiatric status, history, treatment or progress (other than for legal or consultative purposes) for other physicians, agencies, or insurance carriers.
H2011	\$19.37	Emergency Services Crisis intervention services, per 15 minutes (eight units maximum per date of service)
90887	\$33.64 per one-half hour	Family Consultation Interpretation or explanation of results of psychiatric, or other medical examinations and procedures, or other accumulated data to family or other responsible persons, or advising them how to assist patient.
	\$48.56 per hour	Community Consultation and Education
	\$85.61 per hour	Reevaluation
	Rates as indicated in 114.3 CMR 6.03(3).	Psychological Testing

(2) Rates for Mental Health Centers when services are delivered in a Nursing Home. The following codes, rates and descriptions apply to services provided by mental health centers in a nursing home.

Service Code	Allowed Rates	Service Description
90801	\$85.61 per hour	Psychiatric diagnostic interview examination (includes residential care setting)
90862	32.09 per visit of approximately 15 minutes	Pharmacologic management, including prescription, use and review of medication with no more than minimal medical psychotherapy (includes residential care setting)

90816		ndividual psychotherapy, insight-oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 20-30 minutes face-to-face with the patient;
90818	\$69.12 per 45-50 mins	Individual psychotherapy, insight-oriented, behavior modifying and/or supportive, in an inpatient hospital, partial hospital or residential care setting, approximately 45-50 face-to-face with the patient
90847	\$34.56 per 20-30 mins.	Family psychotherapy (conjoint psychotherapy) (with patient present) (includes residential care setting)
90853	\$8.01 per person per one-half hour session not to exceed 10 publicly-aided clients	Group psychotherapy (other than of a multiple-family group) (by professional staff member as defined in 130 CMR 429.424) (three units maximum per session) (includes residential care setting)
90849	\$8.01 per person per one-half hr. session not to exceed 10 publicly-aided clients	Multiple-family group psychotherapy (includes residential care setting)
90882	\$34.19 per one-half hour	Environmental intervention for medical management purposes on a psychiatric patient's behalf with agencies, employers, or institutions (each 30 minute unit; two units maximum per session) (includes residential care setting)
H2011	\$19.37	Crisis intervention services, per 15 minutes (eight units maximum per date of service) (includes residential care setting)
90887		Interpretation or explanation of results of psychiatric, or other dical examinations or procedures, or other accumulated data family or other responsible persons, or advising them how to assist patient (two units maximum per session) (includes residential care setting)

(3) <u>Rates for Psychological Testing</u>. The maximum rates for psychological tests, including but not limited to those listed below, are contained in 114.3 CMR 29.00 Psychological Services. The rates cover the complete cost of interviewing, testing, scoring, interpreting, and writing reports of tests.

Procedure

<u>Code</u> <u>Description</u>

Psychological testing (includes psychodiagnostic assessment of personality, psychopathology,

emotionality, intellectual abilities, eg.WAIS-R, Rorschach, MMPI) with interpretation and report,

Per hour

Code Description

96115 Neurobehavioral Status Exam (clinical assessment

of thinking, reasoning, and judgement, e.g. acquired knowledge, attention, memory, visual spatial abilities, language functions, planning) with

interpretation and report, per hour

96117 Neuropsychological testing battery (e.g. Halstead-

Reitan, Luria, WAIS-R) with interpretation and

Report, per hour.

- (5) <u>Individual Consideration</u>. Rates of payment to eligible providers for services authorized in accordance with 114.3 CMR 6.03(2), but not listed herein, or authorized services performed in exceptional circumstances shall be determined on an Individual Consideration (I.C.) basis by the governmental unit or purchaser under M.G.L. c. 152 upon receipt of a bill which describes the services rendered.
- (6) <u>Criteria for Determining Rates Under Individual Consideration</u>. The determination of rates of payment for authorized I.C. procedures shall be in accordance with the following criteria:
 - (a) Time required to perform the service;
 - (b) Degree of skill required for service rendered;
 - (c) Severity and/or complexity of the client's disorder or disability;
 - (d) Policies, procedures, and practices of other third party purchasers of care;
 - (e) Such other standards and criteria as may be adopted from time to time by the Division.
- (7) Other Services. The rates of payment for other community health center and mental health center services, care, and supplies provided publicly-aided patients and industrial accident patients shall be based on the applicable regulation and rates of payment for the specific care and services rendered as issued by the Division or the governmental unit where the latter's schedules have not been superseded by 114 CMR. Rates for such care shall include, but not be limited to, those established for psychiatric day treatment clinic services, early intervention program services, health services in community health centers and other individual practitioner services and noninstitutional programs.
- (8) <u>Billing</u>. Each clinic shall bill the governmental unit according to the appropriate fee schedule on a prescribed form. Each specific service must be separately enumerated on the bill.

6.04: Reporting Requirements and Sanctions

- (1) <u>Annual Reports</u>. Annual, and complete Uniform Financial Reports ("UFRs") must be filed through the Internet by eligible providers according to the terms for filing set by the Operational Services Division within the Audit and Preparation Manual portion of the UFR for the given year.
 - (a) <u>Community Health Centers</u> which are eligible providers under 114.3 CMR 6.00 shall file complete and accurate Community Health Center Cost Schedules within the UFR, making the required allocations for mental health costs and services.
 - (b) <u>Additional Information</u>. All providers subject to 114.3 CMR 6.00 shall file such additional information as the Division may from time to time reasonably require.
- (2) <u>Failure to File Timely Reports</u>. Failure on the part of a provider to submit accurate information within the time as required by 114.3 CMR 6.04(1), or to submit other acceptable data and statistics which may be required, may result in the delay, reduction or elimination of the provider's rates to which such information is applied, as well as application of other sanctions provided by law.
- (3) <u>Mergers, Acquisitions, Other Transfers</u>. Any providers involved in a merger, buy out, acquisition, purchase, pooling of interest or other arrangement involving the transfer of business will be treated as a single provider for the purposes of 114.3 CMR 6.04. All compliance liabilities of the transferor shall be the responsibility of the transferee.

6.05: Severability of the Provisions of 114.3 CMR 6.00

The provisions of 114.3 CMR 6.00 is severable, and if any provision of 114.3 CMR 6.00 or application of such provision to any mental health center or community health center or any circumstances shall be held to be invalid or unconstitutional, such invalidity shall not be construed to affect the validity or constitutionality of any remaining provisions of 114.3 CMR 6.00 or application of such provisions to mental health centers or community health centers or circumstances other than those held invalid.

REGULATORY AUTHORITY

114.3 CMR 6.00: M.G.L. c. 118Gand M.G.L.c.152 § 13.